Signature

Typed or printed name

Susan M. Langworthy

| | 2 2 2006 (S) | | u.s | . Patent and 1 | PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 Trademark Office; U.S. DEPARTMENT OF COMMERCE | | | | | | | | |
|--|----------------------------------|------------|---|------------------------------|--|--|--|--|--|--|--|--|--|
| Under the Pa | perwork Reflication Act of 1995. | no persons | s are required to respond to a c Application Number | ollection of in 09/819,56 | formation unless it displays a valid OMB control number. | | | | | | | | |
| TRANSMITTAL | | | Filing Date | March 27, | 2001 | | | | | | | | |
| | FORM | | First Named Inventor | Larry L. Hood | | | | | | | | | |
| | | | Art Unit | 3739 | | | | | | | | | |
| (to be used for | all correspondence after initial | filing) | Examiner Name | David M. | David M. Shay | | | | | | | | |
| | Pages in This Submission | | Attorney Docket Number | 054 (P004X2CX) | | | | | | | | | |
| ENCLOSURES (Check all that apply) | | | | | | | | | | | | | |
| Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | | Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocat Change of Correspondence Ferminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on C | ion Address | After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Return Postcard | | | | | | | | |
| Firm Nome | SIGNA | TURE O | F APPLICANT, ATTO | ORNEY, C | DR AGENT | | | | | | | | |
| Firm Name | Irell & Manella LLP | | | | | | | | | | | | |
| Signature | Bon You | h . | | | | | | | | | | | |
| Printed name Ben J. Yorks | | | | | | | | | | | | | |
| Date March 20, 2006 | | | | Reg. No. | 33,609 | | | | | | | | |
| CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: | | | | | | | | | | | | | |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date March 20, 2006

PTO/SB/17 (12-04)
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| Under the Panerwork Reduction | Act of 1995 | no nersons are redi | ired to n | espond to a collection | on of infor | mation unles | s it disnlavs a | valid OMB control number | | | | |
|--|-----------------------------|--|----------------|------------------------|-------------|------------------------|------------------|--|--|--|--|--|
| Effectiv | 40401 | Complete if Known | | | | | | | | | | |
| Fees pursuant to the Consolida | Application Number | | 09/819,561 | | | | | | | | | |
| FEE TR | Filing Date | | March 27 | 2001 | | | | | | | | |
| For | First Named Inventor | | Larry L. Hood | | | | | | | | | |
| Applicant claims small e | Examiner Name | | David M. Shay | | | | | | | | | |
| | Art Unit 3739 | | | | | | | | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 0 | | | | Attorney Docke | 155694-0 | 155694-0054 (P004X2CX) | | | | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | | | | |
| Check Credit Card Money Order None Other (please identify): | | | | | | | | | | | | |
| Deposit Account Deposit Account Number: 09-0946 Deposit Account Name: Irell & Manella LLP | | | | | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | | | | | | |
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| under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card | | | | | | | | | | | | |
| Information and authorization of | on PTO-2038 | <u>. </u> | | | | | - | | | | | |
| FEE CALCULATION | | | | | | | | | | | | |
| 1. BASIC FILING, SEAR | CH, AND | EXAMINATION I | | | =>/44 | ******** | | | | | | |
| | FILING I | トヒヒS Small Entity | SEAF | RCH FEES Small Entity | EXA | INATION Small | I FEES Entity | | | | | |
| Application Type | Fee (\$) | Fee (\$) | <u>Fee (\$</u> | Fee (\$) | <u>Fee</u> | | | Fees Paid (\$) | | | | |
| Utility | 300 | 150 | 500 | 250 | 200 |) 10 | 0 | | | | | |
| Design | 200 | 100 | 100 | 50 | 130 |) 6 | 5 | | | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 8 | 0 | | | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 30 | 0 | | | | | |
| Provisional | 200 | 100 | 0 | 0 | (|) | 0 | | | | | |
| 2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Each independent claim o | Reissues, | , each claim over | · 20 and | d more than in t | the origi | inal paten | t iginal nate | Fee (\$) Small Entity Fee (\$) Fee (\$) 50 25 ent 200 100 | | | | |
| Multiple dependent claims | | Ji Keissues, caei | macp | chacht claim in | iore ara | 1 111 1110 01 | 15mar pare | 360 180 | | | | |
| | xtra Claim | s <u>Fee (\$)</u> | Fee | Paid (\$) | Multi | ole Depend | dent Claims | <u>i</u> | | | | |
| 20 or HP = | | _ ,x: | = | | <u>Fe</u> | <u>e (\$)</u> | <u>Fee Pai</u> | <u>d (\$)</u> | | | | |
| | aims paid for xtra Claim | <u>s Fee (\$)</u> | | Paid (\$) | _ | | | | | | | |
| - 3 or HP = HP = highest number of indepe | ndent claims | | = an 3 | | | | | | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Lettra Sheets Number of each additional 50 or fraction thereof 100 = /50 = (round up to a whole number) x = | | | | | | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other: | | | | | | | | | | | | |
| SUBMITTED BY | | | | | | | | | | | | |
| | e/w | Dhy | | Registration No. | 33,609 | | Telephone | 949-760-0991 | | | | |
| ignature Klon | | <u> </u> | | (Attorney/Agent) | | _ | | | | | | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Name (Print/Type) Ben J. Yorks



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

re Application of:

Larry L. Hood

Application No.: 09/819,561

Filed: March 27, 2001

METHOD AND APPARATUS FOR MODIFICATIONS OF VISUAL ACUITY

BY THERMAL MEANS

Examiner: David M. Shay

Art Group: 3739

AMENDMENT UNDER 37 C.F.R. §1.116

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

The Applicant would like to file the following response to the Office Action dated December 29, 2005.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 8 of this paper.